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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000064006**

QUALITY ENVIRONMENTAL SOLUTIONS, INC.

QUALITY	ENVIRONMENTAL SOLUTION)(10, II10)				
Principal Place	of Business	Mailing Address			115011201 110 1211 10011 0011	
214 MORTON LANE						
WINTER SPRINGS FL 32708 WINTER SPRINGS FL 327		WINTER SPRINGS FL 32708			DO NOT WRITE IN THIS SPACE	
	•	•			3. Date Incorporated or Qualifed-	
					07/22/1997	
5. Dringing Old	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
z. Principai Pia	,	26		59-3464986	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
22		27			\$5.00 May Be	
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	Added to Fees
23		Zip Country		This corporation owes the current year		
Zip	Country	Zip	30	7	Personal Property Tax.	∐Yes ∐No
24	25		<u> </u>		10. Name and Address of New Register	ed Agent
	9. Name and Address of Current	L'edisteran Adeir	81	Name		
RDIN	UZRAKA ALICHICT I		82	Ctroot Add	ress (P.O. Box Number is Not Acceptable)	
214 MORTON LANE			82	2 Street Addi	ress (F.O. Box realmost to restrict the property	2. 14. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
WINTER SPRINGS FL 32708			8:	3		经独制 医纤维膜 【
*****			8	4 City	12 m 1987 (1994) 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1	85 Zip Code
				1 -		L bo Lip Godd
office or r agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obliga Signature, typed or printed name of registered agen	ations of, Section 607.0505, Flor	ida Statute	es.	poration submits this statement for the purposion's board of directors. I hereby accept the appearance of the purposion's board of directors. I hereby accept the appearance of the purposition of the purp	
	Signature, typed or printed name or registered agei	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
12. TITLE	DP	☐ DELETE	1.1 TITLE			Change Addition
NAME	BRINKMAN, AUGUST		1.2 NAME	E		•
STREET ADDRESS	ALL MODYON LAND		1.3 STRE	EET ADDRESS		İ
CITY-ST-ZIP	WINTER SPRINGS FL 32708		1.4 CITY			☐ Change ☐ Addition
TITLE	DST	DELETE	2.1 TITLE		•	
NAME	BRINKMAN, JOY A		2.2 NAM	l l		
STREET ADDRESS	214 MORTON LANE		2.3 STRE	EET ADDRESS		·
CITY-ST-ZIP	WINTER SPRINGS FL-32708					
TITLE			_	Y-ST-ZIP		☐ Change ☐ Addition
NAME	(1975) At 18 A 1	EFF C DELETE +	3.1 TITU	Y-ST-ZIP		☐ Change ☐ Addition
STREET ADDRESS	TANT DE BELL.	esti kara in tangan Anggaran da in Delete ka Anggaran da	3.1 TITU 3.2 NAM	Y-ST-ZIP E IE		☐ Change ☐ Addition
T ' '	基於的主义的 是	हर्ता हो। स्थानिक को हर्ना <mark>⊕ DELETE</mark> र भारतकार हो।	3.1 TITU 3.2 NAM 3.3 STR	Y-ST-ZIP E BE EET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP	[李] [1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	## GATTO NA GA DELETE ** Mondon, Tg.	3.1 TITU 3.2 NAM 3.3 STR 3.4. CIT	Y-ST-ZIP E IE EET ADDRESS Y-ST-ZIP		☐ Change ☐ Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE

FILED

Jan 25, 1999 8:00am

Secretary of State

01-25-1999 90039 046 ***150.00